

the aid of his fingers, and sometimes the morsel escapes from the right side of the mouth from deficient action of the orbicularis oris. He cannot forcibly close his mouth on the right side, so that when he tries to whistle the right side of the mouth to the middle line is open, while the corresponding part on the other side is shut. When he tries to spit, he is incapable of directing the saliva, because it is immediately poured into the open part of the mouth and escapes. He does not at present complain of any pain, and his general health is good; pulse 100. He was ordered to take the following:—

R. Tartar-emeti, gr. ss;

Infusion of senna, ℥j;

Sulphate of magnesia, ℥ss.

The draught to be taken every four hours.

27. Much the same; he has felt considerable pain in his right eye and behind the ear. The medicine has opened his bowels, and caused him to vomit once; he thinks he has rather more power in the muscles of the right side of the face than he had yesterday; appetite good; no thirst; tongue clean; has slept well.

I now contemplated the application of a blister to the part of the portio dura where that nerve makes its exit from the skull; but the man became alarmed at his condition, and without my knowledge procured admission into the University College Hospital, and was placed under the care of Dr. Thomson. A blister was applied to the spot where I intended to apply it, and the blistered surface was sprinkled with strychnia, and under this treatment the patient rapidly recovered, and is now quite well, having had no return of the complaint.

There is no obscurity in this case, it is one of paralysis of the portio dura; and the obvious treatment consists in attention to the state of the digestive organs, and the application of counter-irritation to the origin of the nerve.

CASE OF SPASMODIC CHOLERA,

DESCRIBED BY THE PATIENT.

ITS DIFFERENCE FROM "ENGLISH CHOLERA."

ITS PATHOLOGY. ITS TREATMENT BY LAUDANUM AND STIMULANTS.

To the Editor of THE LANCET.

SIR,—I have lately, by personal experience, gained much additional knowledge of the symptoms and pathology of spasmodic cholera. Indeed, I have very narrowly escaped with my life from an attack of that most appalling disease. On the 22nd of August, at half-past one, a.m., I awoke with an urgent desire to go to stool; but without any griping pain, or much uneasiness. The bowels were at once well washed out; so

also was the stomach, by vomiting. After this, at intervals of ten minutes or so, the vomiting and dejections continued, of a bland, clear fluid, much resembling in appearance reddish urine. For about an hour this was accompanied with no pain or great uneasiness, beyond the exertion of vomiting, till about three o'clock, when the vomiting and dejections became so constant that I felt greatly exhausted. About four o'clock I began to suffer with most distressing cramps in the calves of the legs; to such a degree that, though faint and exhausted, I was obliged to jump up on my feet, as rubbing seemed only to aggravate them. I had probably by this time lost upwards of two gallons of fluid. These symptoms continued worse and worse, and about five o'clock I was so perfectly exhausted, that I was wholly unable to rise even when sick: the fluid was literally pumped over the bed at short intervals, the spasmodic action drawing my head and neck backwards, as in opisthotonos, in a truly distressing manner. In short, I could rise for nothing, but was thrown about by the involuntary convulsive action. The fatigue in the diaphragm and muscles of respiration now became so painful, that I could get no breath; and with the sensation of a peculiar stoppage in the ears, I felt as if I was being smothered under water. This continued worse and worse, till the breathing and pulse were imperceptible; though I felt perfectly conscious all the time. About six o'clock (as I understand) I had a good dose of ether and laudanum poured down my throat. This shortly seemed to revive me a little; so I had two more doses of the same within half an hour. The breathing got very slowly and gradually better. The dejections diminished, and ceased wholly about ten o'clock, a.m.; but the vomiting of clear fluid continued, at intervals of a quarter or half an hour, the whole day, and did not cease wholly till about eight o'clock, p.m. Of course the secretions were suspended; there was no urine, and no saliva; the thirst was excessive, as may be imagined. I drank during the day upwards of thirty bottles (two gallons) of soda water and effervescing lemonade, besides large draughts of cold water. The demand for fluid was so great, that I felt and wished I could lie in a field and have a river of beer turned through me. At seven o'clock, p.m., the skin was still black, and the veins plastic; that is, they might be pinched up, and would maintain the form, from the viscosity of the contained blood. I need only further name the impatient restlessness and jactitation from inanition, which gradually subsided in a day or two. I have now enumerated every symptom with somewhat natural force and feeling. The muscles which had been so violently cramped were inflamed and tender for many days afterwards. I must not forget to mention my condition

prior to the attack. I had suffered a good deal with anxiety and fatigue during the summer, which has been very hot. On the morning of Sunday, the 21st, the day previous to my illness, which was a remarkably hot day, I had been much hurried. Also on sitting down to dinner, I was called away urgently a distance of two miles to see two patients in one house; one with English cholera, and the other with fever. Having prescribed, I dined with the family; but was somewhat affected (sickened) by the effluvia from a stagnant pond, the dining-room windows being wide open on account of the heat. I dined, sparingly enough, on trout, roast beef, and plum-tart; and drank altogether three glasses of wine. My two patients were visitors in the family, and I attribute their indisposition to the same cause as my own; namely, to the effluvia from the stagnant pond.

My temperament is active and irritable. To be particular, probably I am as fair a specimen of the musculo-bilious temperament as can well be.

It is well known that our present name for this disease is a complete misnomer. The word *cholera* can only be applied with propriety to what is too often called the English form of this disease, but which in reality is no form of this disease at all, but one of a radically different nature;—a bilious form of indigestion, with diarrhoea. But in the spasmodic, or Asiatic, disease, there is nothing like bilious indigestion, and no griping pain in the bowels whatever from first to last. The bowels are simply washed out, as would be the case by injecting warm water into them, saving only that they are washed out by the spontaneous and copious secretion of serous fluid into them. There is no pain or uneasiness till the secretion occurs in the upper bowels and stomach (for it commences and ceases in the lower bowels first) when the vomiting begins, which becomes eventually most distressing.

The essential pathology of spasmodic cholera is as follows:—The mucous lining membrane of the stomach and bowels (from some unknown cause,—for the necessary expulsion of viroid matter perhaps,) takes on the abnormal action of excreting the serum from the blood. This draining of serum goes on for some time before anything worse occurs; and the first object is to stop it. I know perfectly well by experience how this can be done, and will point out the plan presently. To proceed with the pathology.—When the fluids have been drained to a certain extent, the muscular fibrillæ, or fasciculi, being no longer separated and lubricated, but being brought into harsh and immediate contact, such irritability is produced as constitutes involuntary action and cramps, violent in the extreme, till the irritability is exhausted in the state of collapse; for I observed that I had little or no cramps during this state.

I believe that the serum is excreted in order to rid the system of some viroid cause; and I think so, because where this excretion has been stopped the case ends in fever. I have shown that fever is another natural effort to decompose and rid the system of viroid matter.—(See a few numbers back in *THE LANCET*, I am writing in the country, and therefore cannot refer back.)—Moreover, I have found some patients labouring under cholera, and others under fever, who have been subjected to the same atmosphere and external causes, as shown above.

The method of stopping the excretion of serum in spasmodic cholera is by opium in large doses; but it is useless to give it in the form of pills; for give it how you will, it will be rejected,—and if in pills, long before they are dissolved, so as to be of any use. Now laudanum will act at once; will be kept in contact with the internal coat of the stomach for a time, and when rejected, may be repeated as often as necessary. When there is great prostration, the opiate may be combined with ether. Indeed, stimulants are required from the first. The next object is to resupply the fluid. Nature demands this most peremptorily; for the thirst is beyond endurance. If medical men will simply oppose the symptoms when they understand them, and do what the nature of the disease points out, they cannot go wrong. The reason why the secretions are suspended, is simply because the serum of the blood is drained away; there is no blood to secrete from. So soon as the fluid is resupplied, the secretions are restored; and therefore none of these symptoms need be meddled with, they being understood. But it is of chief importance to understand that spasmodic cholera has no alliance with indigestion,—with English cholera. Indeed, if I were seized with diarrhoea, accompanied with griping pains, I should feel perfectly safe from spasmodic cholera; and the worse the pain, the more safe I should consider myself. To talk of English cholera and the spasmodic disease as degrees of the same affection, betrays a total ignorance of the pathology of the latter. Spasmodic cholera, as before shown, is, essentially, *the excretion of the serum of the blood*; and this ought to give a name to the disease. Dr. Clanny, of Sunderland, named it hyperanthrax, from the superabundance of carbon. But this is only an ulterior effect. Hyperanthrax would be a much better name for the town of Newcastle (*over-coal*).

I cannot close this paper without expressing my warmest acknowledgments to my medical neighbours, Mr. Mitchell and Mr. Searle; also to Dr. Hughes, of Guy's Hospital, and Mr. Lavies, of Westminster. Had it not been for their very kind and prompt assistance I must have died. I remain, Sir,

ROBERT STEVENS.

Kennington, Sept. 11, 1842.